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CONFIRMATION NO. 6524

Bib Data Sheet

SERIAL NUMBER 09/886,193	FILING DATE 06/21/2001 RULE	CLASS 709	GROUP ART UNIT 2157	ATTORNEY DOCKET NO. AUS920010469US1
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** CONTINUING DATA *****

None

** FOREIGN APPLICATIONS *****

None

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 08/17/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged: <i>[Signature]</i> Examiner's Signature	NY	11	42	6
<i>[Initials]</i> Initials				

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TITLE

PCI migration semantic storage I/O

FILING FEE RECEIVED 1346	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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